

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000056067

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** BERNARDO TILE, LLC

**Current Principal Place of Business:**

2817 SPRINGDALE CIR  
VALRICO, FL 33596 US

**New Principal Place of Business:**

2817 SPRINGDELL CIR  
VALRICO, FL 33596 US

**Current Mailing Address:**

2817 SPRINGDALE CIR  
VALRICO, FL 33596 US

**New Mailing Address:**

2817 SPRINGDELL CIR  
VALRICO, FL 33596 US

**FEI Number:** 20-0562913

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ESTRADA, WILLIAM  
2817 SPRINGDALE CIR  
VALRICO, FL 33596 US

**Name and Address of New Registered Agent:**

ESTRADA, WILLIAM  
2817 SPRINGDELL CIR  
VALRICO, FL 33596 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM ESTRADA

02/18/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ESTRADA, WILLIAM I  
Address: 2817 SPRINGDELL CIR  
City-St-Zip: VALRICO, FL 33596

Title: MGRM  
Name: BLANCO, NELSON C  
Address: 2817 SPRINGDELL CIR  
City-St-Zip: VALRICO, FL 33596

Title: MGRM  
Name: MELGAR, ROSA E  
Address: 2817 SPRINGDELL CIR  
City-St-Zip: VALRICO, FL 33596

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM I ESTRADA

MGRM

02/18/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date